

CHAPTER 5

CONCLUSIONS AND RECOMMENDATIONS

A correlational-descriptive study was conducted to describe family support and quality of life and to examine the relationship between the two variables in hemodialysis patients. Sixty hemodialysis patients were recruited at the hemodialysis units of the First, Second, and Third Teaching Hospitals of Hunan Medical University and Hunan People Hospital in Changsha city, P.R. China. The demographic Data Form, the Modified Quality of Life Questionnaire, and the Modified Perceived Social Support from Family (MPSS-Fa) Scale were used to collect data of demographic information and study variables. Descriptive analysis including frequency, percentage, mean, standard deviation, and range were used to describe the subjects' demographic characteristics, family support and quality of life. Pearson's product-moment correlation analysis was used to examine the relationship between family support and quality of life of hemodialysis patients.

Conclusions

The conclusions based on the findings of this study were as follows:

1. More than half of the subjects (53.3%) perceived a low level of quality of life while 46.7% perceived their quality of life as being high. Life satisfaction had the highest mean score and health and functioning had the lowest mean score.

2. About half of the subjects (51.7%) perceived a high level of family support while 48.3% perceived their family support as being low.

3. There was a significantly positive relationship between family support and quality of life of hemodialysis patients ($r=.4379$, $p<.001$). Family support was also significantly and positively related to each dimensions of quality of life as life satisfaction, self-concept, and health and functioning. However, family support was not correlated with socio-economic factors.

Implications of Findings

There are many implications for nursing practice, nursing education, nursing administration, and nursing research.

Implication for nursing practice

The findings of this study provide some information and guidance for nursing practice. Nurses in dialysis unit may recognize the importance of quality of life and family support, and may want to take some information from this sample into consideration when working with hemodialysis patients. Nurses need to be more concerned about and care for the disease progression and complications from hemodialysis treatment which could affect the patients normal working life. The findings regarding the relationships between quality of life and family support suggest that family support is one of the important factors that could enhance the quality of life among hemodialysis clients. Therefore, nurses should be responsible for assisting patients to maintain life, health and well-being by including family members into a type of support and fostering family support.

In this study, the spouse was the most helpful person as reported by the subjects, so nurses should pay more attention to family education such as the techniques for effective communication and stress reduction, in order to help them provide support to improve the quality of life of hemodialysis patients.

Implications for nursing education

The findings provide a beneficial reference for teaching and emphasizing the role of the nurse in identifying the quality of life and family support in hemodialysis patients. Nursing educators should instruct their students that quality of life and family support should be considered as a major concern in planning and implementing therapeutic programs for hemodialysis patients.

Implications for nursing administration

The findings of this study can be applied in nursing administration. Administrators should set a standard of care for hemodialysis patients by fostering family support. Some rules and regulations of hospitals such as visiting times and rules of keeping patients company should be reconsidered according to patients' needs of family support.

Implications for nursing research

Findings of the present study provide a data base for further research in family support and quality of life of hemodialysis patients, and can also provide a reference for studying these two variables in other fields. The results of this study can be used as supportive evidence or a guideline for establishing some educational programs for hemodialysis patients.

Limitations of the study

Since only 60 subjects were drawn from four hemodialysis units of four hospitals in Changsha City of Hunan Province, P.R. China, these subjects could not be considered as representative of Chinese hemodialysis patients.

Since a purposive sampling method that is non-randomized sampling was used, the potential for sampling bias should be considered and generalization of the findings is relatively limited.

Recommendations

From the limitations of this study, recommendations for further study would be as follows:

1. It is recommended to have a larger sample size of hemodialysis patients in order to generalize the findings.

2. An experimental research is needed to explore the effects of nursing interventions to enhance family support and the quality of life levels of Chinese hemodialysis patients.

3. Better instruments for measuring family support need to be developed because the MPSS-Fa Scale is a dichotomous scale that could not cover all aspects of the patients' response.

4. Other influential factors of family support and quality of life such as age, marital status, education level, income, duration of hemodialysis and settings needed to be further explored, so it will be useful for nurses to have a clear understanding of hemodialysis patients.

5. A qualitative study is needed to provide more description of family support and quality of life that is relevant to Chinese culture.